FORM D



UNITED STATES / 5 /6 SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL										
OMB Number: 3235-0076										
Expires:	April 30, 2008									
Estimated average burden hours per response16.00										
SEC US	E ONLY									
Prefix	Serial									
DATE RI	ECEIVED									

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Common Stock	
Filing Under (Check box(cs) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: Amendment	Section 4(6) C. T. ULOE
A. BASIC IDENTIFICATION DATA	« « " « CY » » / ,
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) First California Mortgage Company	1800 1800 P. 1
Address of Executive Offices (Number and Street, City, State, Zip Code) 5401 Old Redwood Highway, Suite 208 Petaluma, California 94954	Telephone Number (Including Area Code) (707) 238-3700
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Mortgage banking	ESSED
Type of Business Organization	2007
✓ corporation ☐ limited partnership, already formed THOMS ☐ business trust ☐ limited partnership, to be formed FINANCE	SON Explease specify): limited liability company
Actual or Estimated Date of Incorporation or Organization: Month Year	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filled with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION =

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

•		A	. BASIC IDI	ENTL	FICATION DATA				· · · · · · · · · · · · · · · · · · ·
Enter the information reques Each promoter of the iss Each beneficial owner h Each executive officer a Each general and manage	uer, if the issuer ha aving the power to nd director of corpo	is beer vote c orate i	or dispose, or direct the ssuers and of corporate	vote	or disposition of, 10%				
Check Box(es) that Apply:] Promoter	×	Beneficial Owner	×	Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)								
Hart, Sr., Dennis M.									· ·
Business or Residence Address (N		•	•						
5401 Old Redwood Highway, S	uite 208 Petalum	a, Ca							
Check Box(es) that Apply:] Promoter	፟ 🖾	Beneficial Owner		Executive Officer	☒	Director		General and/or Managing Partner
Full Name (Last name first, if ind Hart, Jr., Dennis M.	ividual)								
Business or Residence Address ()	Number and Street	ı, City	. State, Zip Code)		147				
5401 Old Redwood Highway, Se	uite 208 Petalum	a, Ca	lifornia 94954						
Check Box(es) that Apply:] Promoter	☒	Beneficial Owner	☒	Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)								
Hart, Christopher K.			<u> </u>						
Business or Residence Address (1	Number and Street	t. City	, State, Zip Code)						
5401 Old Redwood Highway, S	uite 208 Petalum	ia, Ca	difornia 94954						
Check Box(es) that Apply:] Promoter		Beneficial Owner	⊠	Executive Officer	\boxtimes	Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)							_	
Carlsen, Spencer									· · · · · · · · · · · · · · · · · · ·
Business or Residence Address (-	•						
5401 Old Redwood Highway, S	uite 208 Petalum	ıa, Ca	difornia 94954						
Check Box(es) that Apply:	Promoter	K) 	Beneficial Owner	⊠	Executive Officer	☒	Director		General and/or Managing Partner
Full Name (Last name first, if ind Hints, Ralph	ividual)								
Business or Residence Address ()	Number and Street	l, City	, State, Zip Code)				•		
5401 Old Redwood Highway, St	uite 208 Petalum	ia, Ca	lifornia 94954		•				
Check Box(es) that Apply:	Promoter	×	Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, if ind	iviđual)		_						
Armstrong, Elizabeth H.									
Business or Residence Address (?	Number and Street	ı, City	, State, Zip Code)						
5401 Old Redwood Highway, S	uite 208 Petalum	a, Ca	lifornia 94954						
Check Box(es) that Apply:] Promoter	×	Beneficial Owner		Executive Officer	⊠	Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)						, = =		
Armstrong, David W.									
Business or Residence Address (1			-						
5401 Old Redwood Highway, S									
	(Use blank	sheet	or copy and use add	litiona	l copies of this sheet	, as no	ecessary)		

				B.	INFO	RMATION	ABOUT O	FFERING	•			
1. Has	the issuer sold.	or does the	issuer intend	to sell to no	m-accredited	investors in	this offering	9	,		Yes	No ⊠
	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.										L	123
2. Wha	What is the minimum investment that will be accepted from any individual?										\$	150,000
3. Does	Does the offering permit joint ownership of a single unit?										Yes □	No ⊠
4. Ente	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an											
simil assoc	lar remuneratio ciated person o	on for solicita or agent of a	ition of purch broker or dea	asers in con der registere	nection with ad with the S	sales of secu EC and/or w	rities in the o ith a state or	offering. If a states list th	person to be a name of the	listed is an		
deale	er. If more the	nan five (5)	persons to I	be listed are	associated	persons of	such a broke	er or dealer,	you may s	et forth the		
	(Last name fi				-							
Duninan a	or Residence A	14 Ol	£ 1 C.	. Circ Pro-	20.00.10						7 EU .	
Dusiness c	n Residence A	aaress (Num	per and Stree	r, City, State	e, Zip Code)							
Name of A	Associated Brol	ker or Dealer										
States in V	Which Person L	isted Has So	licited or Inte	ends to Solic	it Purchasers							
	"All States" or										ПΑ	II States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IIL]	[IN]	IIAI	[KS]	[KY]	[LA]	(ME)	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	INMI	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	ועדן	[V1]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	·						• •			([]	(,
Full Name	(Last name fir	st, if individ	ual)									_
Business o	or Residence A	ddress (Num	ber and Stree	t, City, State	. Zip Code)							
Name of A	Associated Brol	ker or Dealer	·		<u></u>	<u>.</u> ,		·				
States in W	Vhich Person L	isted Has So	licited or Inte	nds to Solic	it Purchasers	<u>.</u>						
(Check	"All States" or	check indivi	duals States)								Пл	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	(DC)	[FL]	[GA]	[HI]	ΠDΙ
[11.]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	(MN)	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
(RI)	(SC)	[SD]	[TN]	[TX]	י , נדטן	[VT]	[VA]	[WA]	[WV]	[WI]	(WY)	(PR)
Full Name	(Last name fire	st, if individu	ıal)		· · · · · · · · · · · · · · · · · · ·					11		
Business o	r Residence Ac	ldress (Numt	per and Street	t. City. State	Zin Code)							
	ssociated Brok		-									
	11.5.4.65		 									
	hich Person Li						•					
[AL]	"All States" or [AK]						EFN:21					l States
[NL]	[IN]	[AZ] [IA]	[AR] [KS]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[111]	{ID}
[MT]	[NE]	[NV]	[NII]	[KY] [NJ]	[LA]	[ME]	[MD]	[AMI]	[MI]	[MN]	[MS]	[MO]
[RI]	[SC]	[SD]	[TN]	[TX]	[NM] [HT]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
1)	10/4.1	[P.O.]	[11]	[+A]	[UT]	[VT]	[VA]	[WA]	[WV]	[W1]	[WY]	[PR]

_	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OFP	ROCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		Aggregate	Am	ount Already
	Type of Security	Off	fering Price		Sold
	Debt			\$	0
	Equity	s	300,000	\$	300,000
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)			\$	0
	Partnership Interests			S	0
	Other (Specify)			\$	0
	Total	s	300,000	\$	300,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
	•	1	Number investors	Do	Aggregate Har Amount I Purchase
	Accredited investors		2	s _	300,000
	Non-accredited Investors		0	S_ _	. 0
	Total (for filings under Rule 504 only)		0	\$	0
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
	Type of Offering	•	Type of Security	Dol	lar Amount Sold
	Rule 505		N/A	S	
	Regulation A		N/A		
	Rule 504		N/A		
	Total		N/A	s	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			•	0
	Printing and Engraving Costs		_	»—	0
	Legal Fees			\$	
	Accounting Fees			_	000
	Engineering Fees				0
	Sales Commissions (specify finders' fees separately)		U	\$	
	Other Expenses (identify)		Ü		0
	Total		\boxtimes	\$_ <u>5</u> ,	000

	otal expenses furnished in response to Part C	offering price given in response to Part C - Question - Question 4.a. This difference is the "adjusted gros	s	\$ <u>295,000</u>		
	each of the purposes shown. If the amount	gross proceeds to the issuer used or proposed to be for any purpose is not known, furnish an estimate at of the payments listed must equal the adjusted gross Question 4.b above.	nd check			
			Payments to Officers, Directors & Affiliates	Payments To Others		
	Salaries and fees		S	□ s		
	Purchase of real estate			□ \$		
	Purchase, rental or leasing and installation of	machinery and equipment	s	S		
	Construction or leasing of plant buildings and	I facilities	s	□ \$		
	Acquisition of other businesses (including the used in exchange for the assets or securities of	e value of securities involved in this offering that may	/ be	□ \$		
	Repayment of indebtedness		s	S		
	Working capital	•	🖾 \$	\$ 295,000		
	Other (specify):		🗆 s	□ s		
	Column Totals		[] \$	□ \$		
	Total Payments Listed (column totals ad	lded)	\$ 295,000			
_		D. FEDERAL SIGNATURE				
un	certaking by the issuer to furnish the U.S. Security in the paragraph (b)(2) of the control of t		s filed under Rule 505, the follow of its staff, the information furnis	ing signature constit hed by the issuer to		
	r (Print or Type) California Mortgage Company	Signature	Date //9/	~ >		
me	of Signer (Print or Type)	Title of Signer (Print or Type)		- /		

Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (Sec 18, U.S.C. 1001.)

-	E. STATE SIGNATURE		
ł.	Is any party described in 17 CFR 230,262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (times as required by state law.	17 CFR 239.:	500) at such
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to o	fferees.	
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited O (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of conditions have been satisfied.	ffering Exemestablishing (iption hat these
The	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned	d duly author	rized person
	ssuer (Print or Type) irst California Mortgage Company Signature Date		
N	lame of Signer (Print or Type) Title of Signer (Print or Type)	07	

APPENDIX

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-			_			-			,
	Interit	sell to non-							
	!	ed investors						Disqualifica	
1	l .	in	Type of security and					State ULC att	
	s	State	aggregate offering		Type of	finvestor and		explanation	
ļ			price offered in state		amount pu	irchased in State		granted) (F	
ļ 	(Part	B-Item 1)	(Part C-Item 1)		(Par	t C-Item 2)	γ · · · · · · · · · · · · · · · · · · ·	1)
	Ì	ŀ		Number of		Number of Non-			
				Accredited		accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
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	accredite S	sell to non- ed investors in tate B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- accredited Investors	Amount	Yes	No	
KS				144451013	Amount	investors	Amount	168	No	
KY	-									
LA					, <u></u>	7				
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	Intend to sell to non- accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				ation under OE (if yes, uch n of waiver Part E-Item)
			į	Number of		Number of Non-	***		
State	Yes	No		Accredited Investors	Amount	accredited Investors	Amount	Yes	No
ОК					74110441	THVESTOIS	Zinouit	165	181)
OR		-	<u> </u>		•	····-	· · · · · · · · · · · · · · · · · · ·		-
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